

04-05-01

Customer No. 000959

Case Docket No. **FHW-076**04/03/01  
11031 U.S. PTOCOMMISSIONER FOR PATENTS  
Box Patent Application  
Washington, D.C. 2023111017 U.S. PTO  
09/825618  
04/03/01"Express Mail" Mailing Label Number **EL745890005US**Date of Deposit **April 3, 2001**

I hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Signature

**Viriato G. Cardoso**

Please Print Name of Person Signing

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): **Roberto Ciaff**For: **APPARATUS FOR THE DIAGNOSIS AND THERAPY OF NEURO-MUSCULAR AND OTHER TISSUE DISORDERS**

Enclosed are:

- ☐ This is a request for filing a ☐ continuation ☐ divisional application under 37 CFR 1.53(b), of pending prior application serial no. \_\_\_\_\_ filed on \_\_\_\_\_ entitled \_\_\_\_\_.
- ☒ 12 pages of specification, 4 pages of claims, 1 pages of abstract.
- ☒ 10 sheets of drawings.
- ☒ An **executed** Declaration, Petition and Power of Attorney.
- ☒ An assignment of the invention to **Nuron Limited**. A recordation form cover sheet (Form PTO 1595) is also enclosed.
- ☒ Applicant claims small entity status. See 37 CFR 1.27. A Verified Statement Claiming Small Entity Status is enclosed.
- ☒ Certified copy of priority document, Great Britain Patent Application No. 0031654.7, filed 12/23/2000.

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)
FOR:	NO. FILED	NO. EXTRA
BASIC FEE	////////////////////	
TOTAL CLAIMS	24 - 20	= 4
INDEP. CLAIMS	5 - 3	= 2
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

\* If the difference in Col. 2 is less than zero,  
enter "0" in Col. 2.

SMALL ENTITY	
RATE	FEE
////////	\$ 355
x 9=	\$ 36
x 40	\$ 80
+135	\$
TOTAL	\$471.00

OTHER THAN SMALL ENTITY	
RATE	FEE
////////	\$
x 18=	\$
x 80	\$
+270	\$
TOTAL	0

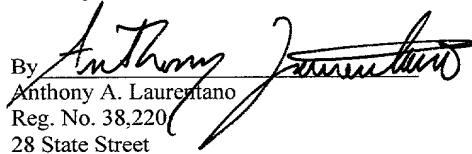
- ☐ Please charge my Deposit Account No. 12-0080 in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$471.00** to cover the filing fee is enclosed.
- ☐ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-0080.  
A duplicate copy of this sheet is enclosed.

- ☐ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 12-0080.  
A duplicate copy of this sheet is enclosed.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.
- ☐ The issue fee set in 37 C.F.R. 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).
- ☒ Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.
- ☒ A check in the amount of **\$40.00** to cover the recording of assignment document, which is also enclosed.
- ☒ Address all future communications (May only be completed by applicant, or attorney or agent of record) to Anthony A. Laurentano, Esq. at **Customer Number: 000959** whose address is:

Lahive & Cockfield, LLP  
28 State Street  
Boston, Massachusetts 02109

Date: April 3, 2001

LAHIVE & COCKFIELD, LLP  
Attorneys at Law

By   
Anthony A. Laurentano  
Reg. No. 38,220  
28 State Street  
Boston, MA 02109  
(617) 227-7400  
Telecopier (617) 742-4214